

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 31 2017

PLEASE PRINT

I Name of Labbrica	(a) Nehra	Vanderheek Roheri	: Clegg Periblic Karoutas I	NEW HAMPSHIRE DEPARTMENT OF STATE eann Moccia
 Name of Lobbyist Name of lobbyist 		or corporation, if a		eariii Woccia
Legie	slative Solutions, L.			
	me of partnership, firm			
D	O. Box 10724	Bedford	AtLi	02110
	treet)	(Town/City)	NH (State)	03110 (Zip Code)
	,	(,)	·	
() 603-986-914 (Telephone)	+5 ()(Fax)	e-mail dbeek@a	aoi.com
reportable expense t	ransactions which a	are not attributable t		hay file a separate report for he following client:
	Advantage Capi			
On	(Full Name of Clien	t as it appears on the Lo	bbyist Registration Form)	
OR ☐ All reportable tran unrelated to any parti		vist (including the lob	byist's family), or the lobbyin	ng firm listed below which are
IV. Date of Report Reports cover: acti	April 26, 2017 [July 26, 2017 🔏 activity from 4/1/17 to 6/30/1	7
	October 25, 2017 activity from 7/1/17 to		January 31, 2018 [] activity from 10/1/17 to 12/3	1/17
			transactions made since e Secretary of State's Office,	
VI. Check if addition				
If you have recei	ved fees or made exp	enditures, you must fi	le Addendum A- Fees and I	Expenses
☐ If you have paid a Expense Reimbursem		mbursed expenses, yo	u must file Addendum B – R	eport of Honorariums or .
☐ If you, your firm,	or your family has r	nade political contribu	itions, you must file Addend	um C- Political Contributions
and complete to the b	RSA 15-B, RSA 14-6 est of my knowledge (a)	C and RSA 664 and he	ereby swear or affirm that the	foregoing information is true
Debra J. Vanderbee (Print Name of lobby				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

	(RSA Chapter 15:6)
I. Name of Lobbyist(s) Debra Vanderbeek, Rober	t Clegg, Periklis Karoutas, Leann Moccia
II. Name of lobbyist's partnership, firm or cor	poration, if any:
Legislative Solutions, L	.L.C.
(Name of partnership, firm or corporation)	
III. Name of Client Advantage Capital	Date July 10, 2017
to lobbying, including fees for services such as publ	ne client identified above that are related, directly or indirectly ic advocacy, government relations, or public relations service ted legal work. The gross fee amount reported shall not be
a) Total of all fees received in this reporting period	a) \$ 12,320.82
b) Total of all fees received this calendar year, prior (This should equal the total of all prior monthly re	
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>24,320.82</u>
d) Indicate the amount of any such fees that are due, yet been paid	but have not d) \$ 0
fees. Separate reports are to be filed for expenditure the lobbyist(s)/firm that are unrelated to any one of Expenses are to be reported in one of three categor during the reporting period for salaries, benefits, sujindividual expenses where the expenditure was of \$2 lunch where the cost was \$25.00 or less, purchase of being lobbied, purchase of a ceremonial object given (c) an itemized statement of each individual expenditure any purpose not covered by (a) (for example: purchase of lobbiect to be given to the subject of lobbiect.)	ations are required to report all expenses made from lobbying the smade relative to each client and if expenditures are made be client a separate report may be filed for the lobbyist(s)/firm ries of expenses: (a) the aggregate total of all expenses paid propert staff, and office expenses; (b) the aggregate total of a 25.00 or less (for example: meals purchased during a busines to a person being lobbied with a value of \$25.00 or less); and the made during this reporting period of greater than \$25.00 for lasse of a meal with value of greater than \$25, purchase of anying with a value greater than \$25, but not greater than \$50 openses for honorariums, expense reimbursement, or political and should not be reported on Addendum A.
a) Total aggregate expenses for this reporting period support staff, and office expenses, related directly or i	
b) Total aggregate of expenditures during this reporti in a), of \$25 or less.	ng period , not reported b) \$ 0

c) Total of all itemized expenditures reported in detail in section VI.

c) \$ <u>0</u>

d) Total expenses for this reporting period	d) \$ 12,320.82
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>12,000.00</u>
f) Total of all expenses year to date	f) \$ 24,320.82
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	bbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
all in	July 10, 2017
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

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State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirmation by Lo	bbyist
Statem	nent of Income and Expenses f	or:

		ration: Legislative Solution or the partnership, firm, or	corporation and not related to any
Date of Report (check o	ne):		
April 26, 2017 □	July 26, 2017	October 25, 2017 🗆	January 31, 2018 □
			d Expenses described above, and imber of Addendum forms being
Addendum A(s)			
Addendum B(s)	•		•
Addendum C(s)			
I hereby swear or affirm complete to the best of respectively (Signature of lobbyist)		ief.	ot and each Addendum is true and one of the conduction of the cond
Robert Clegg			
(Print Name of lobbyist))		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirmation by Lobbyis	st
Statem	ent of Income and Expenses for:	

Name of Lobbying part	nership, firm, or corp	oration: Legislative S	olutions
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):			
Date of Report (check o	one):		
April 26, 2017 □	July 26, 2017	October 25, 2017 🗆	January 31, 2018 □ .
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s)).		
Addendum B(s)	ı .		
Addendum C(s)			
I hereby swear or affirm complete to the best of a (Signature of lobbyist)		slief.	nt and each Addendum is true and
/			•
Periklis Karoutas			
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Statement of Income and Expenses for:	
Name of Lobbying partnership, firm, or corporation	Legislative Solutions
Name of Client (leave blank if Statement is for the p	partnership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 26, 2017	ober 25, 2017 □ January 31, 2018 □
	ement of Income and Expenses described above, and ement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	•
Addendum C(s).	
I hereby swear or affirm that the foregoing information complete to the best of my knowledge and belief.	tion on the Statement and each Addendum is true and
Migun IN Olcia	July 10, 2017
(Signature of lobbyist)	(Date)
Leann Moccia	